SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR I Š -

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

STATES AND	MAY 06 2016			CATION FOR PERMIT
Refund:		Amount Paid:	Dave	75 mit #:
	5-12-16	8	のがながる	16-08

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	×					Building (specify)	Accessory Building	Ĭ.		
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	× _	_	cooking & food prep facilities)		sleeping quarters,	Bunkhouse w/ (□ sanitary, or □ sleeping quarters, or	Bunkhouse			
	×	(			age	with Attached Garage		Use	Commercial Use	
	×	_				with (2 <sup>nd</sup> ) Deck				
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	< >				nack, etc.)	Residence (i.e. capin, nunting snack, etc.)	Kesidence			
	× ×				ure on property)	Principal Structure (first structure on property)	Principal S			
Footage										
Square	Dimensions E	<u>D</u> .		è	Proposed Structure			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Proposed Use	A 1 6 7 7 7 1
	Height:		width:		Length:			ction:	Proposed Construction:	T
	Height:		Width:		Length:	is relevant to it)	ng applied for	. (if permit bei	Existing Structure: (if permit being applied for is relevant to it)	-
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	Vaulted (min 200 gallon)	Vau	Privy (Pit) or			- 1	existing bldg)	Relocate (existing bldg)		12
	M Sanitary (Exists) Specify Type: 付いいらて	) Speci	🏂 Sanitary (Exists	<b>□</b> 33		2-Story	3	☐ Conversion		>~
₩well	Specify Type:		☐ (New) Sanitary	□ 2	Year Round	☐ 1-Story + Loft	Alteration	☐ Addition/Alteration	•	 }-
☐ City			☐ Municipal/City	<u> </u>	M Seasonal	□ 1-Story	truction	□ New Construction		
Water	What Type of Sewer/Sanitary System Is on the property?	What Type of er/Sanitary Sys on the propert	WI Sewer/ Is on	# of bedrooms	Use	# of Stories and/or basement	ct	Project	value at Time of Completion * include donated time &	
									☐ Non-Shoreland  Value at Time	
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Are Wetlands Present?	/in one?	feet	is from Shorelir	Distance Structure	tream (incl. intermittent)	☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent)  Creek or Landward side of Floodplain?  If yes—continue—▶	/Land within dward side of	☐ Is Property Creek or Lan	Vehoreland	*
				LOCAL	Dew					
	Acreage	Lot Size	FO		C onwo	N, Range W	\$ 5 -	) Township	Section SIS	
TYPE.	2	M(55) 47		4 17 %		Ecular	(	1/4	1/4,	
	september 2 contraction of the	Subdivision:	Blockis) No	lotte No	Nol & Page	<u> </u>		And the Park State of the Park	EUCATION	
Ownership)	opert,		42-03-25- Re	1002-2-	3 digits) OY	(Use Tax Statement) 04-	- 1	上egal Description:	PROJECT	
	Attached  □ Yes □ No				!					
orization	Written Authorization	/Zip):	Agent Mailing Address (include City/State/Zip):	gent Mailing Adı	Agent Phone: A		cation on behalf o	erson Signing Appli	Authorized Agent: (Person Signing Application on behalf of Owner(s))	<b>&gt;</b>
Fe:	Plumber Phone:			Plumber:	Contractor Phone: Pl	Contra	•		Contractor:	o
rash-	) 15-63 <b>%</b> - 1		908 HS	T.	City/State/Zip: ASH1478	City/Si	ry 13	J. J.	Address of Property:	3>
-6173	715-682-6173		Ashlan) WI	12 J	71270 St. H	J D		avi	Owner's Name:	С
R SHAWWAY	B.O.A. & OTHER		LUSE   SPECIAL USE	CONDITIONAL USE	□ PRIVY □	SAN	☐ LAND USE	QUESTED-	TYPE OF PERMIT REQUESTED-	4
					NT.	DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.	PERMITS HAVE	CTION UNTIL ALL	O NOT START CONSTRU	Ö

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)  Address to send permit	Authorized Agent:	Owner(s):  (If there are Wultiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)
Co	Date_	Date_
Attach Copy of Tax Stateme		5/2
h		**************************************

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES and complete. I (we) acknowledge that I (we) are (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or both this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described providing at any reasonable time for the purpose of inspection.

J

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Secretarial Staff

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Other: (explain)

Conditional Use: (explain)
Other: (explain)

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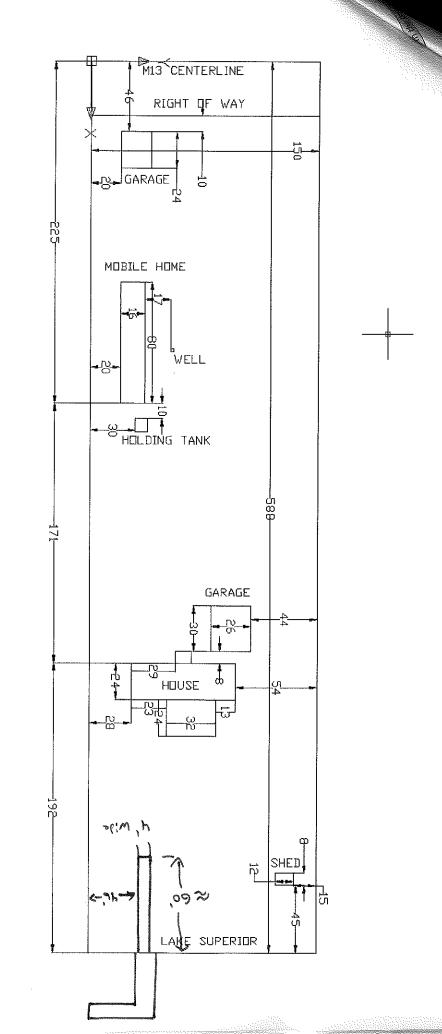
K

2401

Special Use: (explain)

Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

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te of Re-Inspection:		They need to be at			Conditions	n: 5 12 16 n, Committee or Board o	Inspect
Zoning District (RPS) Lakes Classification (1-Supen		purper or 35	S.	Man C.	product	Record: Not-cu d	Inspection Recor
□ No	ented by Owner Ares	Were Property Lines Represented by Owner Was Property Surveyed		+ $+$ $+$	Yes   No	egally te De	Was Proposed
	e (B.O.A.) Case #:	Previously Granted by Variance (B.O.A.)				္ဂ	Granted by Variance (B.O.A.)
□ Yes	No Affid	Mitigation Required Yes	No ON O	rd) guous Lot(s))	es (Deed of Record)es (Fused/Contiguous Lot(s))	ub-Standard Lot Yes mon Ownership Yes lon-Conforming Pes	Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming
Thing was	with well and	15	13 Liber 19	Reason for Denial: Permit Date:		ate):	Permit Denied (Date): Permit #: // /
ode.	tion or Use has not begun. inforce The Uniform Dwelling Code. e permits.  Sanitary Date:	NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwe	elling: ALL Mu elling: ALL Mu y, State or Feo	its Expire One (1) Year Two Family Dwelling: own, Village, City, Stat Sanitary Number:	I Land Use Perm n Of New One & The local T	NOTICE: All Land Use I For The Construction Of New O The lo Issuance Information (County Use Only)	Issuance Info
bosed site of the structure, or must be be be.  Derivy (P) and Well (W).	eviously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be expense.  **Reproposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).	construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setbac orner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the propeyor at the owner's expense.  Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT)	(30) feet from the artment by use of nstruction, S	et but less than thirty verifiable by the Dep	nore than ten (10) fe y surveyed corner, or 	or construction of a structure red corner to the other previously reyor at the owner's expense stake or Mark Pro	the plac viously s by a lice
eviously surveyed corner to the	t be measured must be visible from one pr	undary line from which the setback must be	Feet ired setback, the box	NIA ninimum requ s expense.	ng) within ten (10) feet of sed surveyor at the o	Privy (Portable, Composting) sment or construction of a structure within ten (10) feet of the manner or marked by a ficensed surveyor at the owner.	Setback to Privy Prior to the placement other previously survey
> 400 Fee		Setback to Well	Feet Feet	× ₹000	nk	Septic Tank or Holding Tank Drain Field	Setback to Septic
Fee ☐ Yes ☐ No Fee	rty	Setback from Wetland 20% Slope Area on property Elevation of Floodplain	Feet Feet Feet	2 4 5 2 4 5		Setback from the South Lot Line Setback from the West Lot Line Setback from the East Lot Line	Setback from th Setback from th Setback from th
Fee	Bluff	Setback from the Bank or	Feet			Setback from the North Lot Line	Setback from th
O Fee	dinary high-water mark)	Setback from the Lake (ordinary high-water	Feet	7 to	d Road	Setback from the Centerline of Platted Road	Setback from th
Measurement	ption	Description	S2000	Measurement		Description	
d by the Planning & Zoning Dept	$\mathcal{C}^{N}$ changes in plans must be approved by the $i$	SE SE	2/2 2/2	est point)	ed to the clos	(8) Setbacks: (measured to the closest point)	Flease comp
	85		8				
	>						- ANGELON -
70000 P 27000 D 20000 D			:				
				1 765	oc A	. «	
	(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	) Drain Field (DF); (*) Holdin ;; or (*) Pond 6	Tank (ST); (* stream/Creek spes over 20%	(W); (*) Septic ; (*) River; (*) S ands; or (*) Slo		Show: Show any (*): Show any (*):	(5) (7)
		(Name Frontage Road) artv	ontage Road on vour Prope	o) on Plot Plan way and (*) Fr		Show / Indicate: Show Location of (*): Show:	(2) (3)
		applying for)	hat you are a	Bardless of w	your Braylarty	(1) Show Location of:  Proposed-Construction	wthe box bel



## SUBNATE SOMPLETED APPLICATION, TAX STATEMENT AND FEE TO: nton (715) 28-8844

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Dard D) mp Ecclifed E | W E APR 19 2016

Permit #: Refund: Date: Amount Paid: \$875 51316 6,0093

Bayfield Co. Zoning Depi

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN IS

	Section 18, Township 48, N, Range 04 W	1/4,1/4 \ \delta \delta \vert \text{Lot(s)} \ \delta \delta \delta \vert \delta \	PROJECT  LOCATION  Legal Description: (Use) Tax Statement)	Authorized Agent: (Person Signing Application on behalf of Owner(s))	Amaclo Luppino, Inc.	Address of Property: 73605 Starte Hwy 13	Grace Bible Fellowship		TYPE OF PERMIT REQUESTED—▶ X LAND USE ☐ SAI	DO NOT START CORSINGCITOR OR IL ALL TERROLD IMPERIOR IS GOT TO THE MENTAL OF THE PROPERTY OF T
A CONTRACTOR OF THE PROPERTY O	- W Barksdale	Sv't Lot Lot(s) CSM Vol & Page Lot(s) No. Block(s) No.	04- 0022-48-04-18-2 05-002-60000	Agent Phone: Agent Mailing Address (include City/State/Zip):	715-561-4906 Cady Plbg + HVAL, LL	Washburn, WI 54891	P.O. Box 904 Washburn, WI 54891		☐ SANITARY ☐ PRIVY ☐ CONDITIONAL USE ☐ SPECIAL USE	A PER I MANAGERA A
	Lot Size Acreage 15.9	Subdivision:	Volume 684 Page(s) 100	ate/Zip):	Plumber Phone: 715 - 373 - 2378	Cell Prione:		Telephone:	CIAL USE 🗆 B.O.A. 🗆 OTHER	and the state of t

Proposed Construction:	Existing Structure	THE PROPERTY OF THE PROPERTY O				350,000	<b>.</b>		Value at Time of Completion * include donated time &	X Non-Shoreland	X Shoreland —	1
uction:	Existing Structure: (if permit being applied for is relevant to it)	The state of the s	Property	☐ Run a Business on	Relocate (existing bldg)	☐ Conversion	X Addition/Alteration	☐ New Construction	Project		☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	☐ Is Property/Land within 300 feet of River, Stream (Incl. Intermittent)  Creek or Landward side of Floodplain? If yes—continue—▶
	or is relevant to it)		☐ Foundation	□ No Basement	☐ Basement	☐ 2-Story	☐ 1-Story + Loft	✓ 1-Story	# of Stories and/or basement		າ 1000 feet of Lake, Pond If ye	n 300 feet of River, Strea of Floodplain? If ye
Length: 60'	Length: 62'						🗡 Year Round	Seasonal	Use		Pond or Flowage If yescontinue	itream (incl. Intermittent) If yescontinue>
				X None		□ 3	□ 2	<u></u>	# of bedrooms	-	Distance Struc	Distance Strue
Width: 60'	Width: 66	None	☐ Compost Toilet	☐ Portable (w/service contract)	☐ Privy (Pit) or □ Vaulted (min 200 gallon)	X Sanitary (Exists) Specify Type: Holding Tanks	□ (New) Sanitary Specify Type:	☐ Municipal/City	What Type of Sewer/Sanitary System Is on the property?		Distance Structure is from Shoreline :	Distance Structure is from Shoreline:
Height: 2	Height: 2			ntract)	ulted (min 200 gallon)	cify Type: Holding Tan	ify Type:		ype of ary System roperty?		□ Yes	ls Property in Floodplain Zone?
22'-3"	56. d.			<u></u>			J □ Well	X City	Water		□No	Are Wetlands Present?

	×	Other: (explain)		
	×	Conditional Use: (explain)		
	×	Special Use: (explain)		
	×	Accessory Building Addition/Alteration (specify)		-
	×	Accessory Building (specify)		Municipal Use
3600	60 × 60 )	Addition/Alteration (specify) Ministry Center Addathon	7	
- Annual - A	×	Wobile Home (manufactured date)		
	×	Bunkhouse w/ (☐ sanitary, or ☐ sleeping quarters, or ☐ cooking & food prep facilities)		
	×	with Attached Garage		Commercial Use
	×	with (2 <sup>nd</sup> ) Deck		\
	×	with a Deck		
	×	with (2 <sup>nd</sup> ) Porch		
	×	with a Porch		Residential Use
	×	with Loft		
	×	Residence (i.e. cabin, hunting shack, etc.)		
	×	Principal Structure (first structure on property)		
Footage	Dimensions	Proposed Structure	•	Proposed Use
1				

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my four) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described properties of the purpose of inspection. Owner(s): (If there are Multip bunders must sign or letter(s) of authorization must accompany this application) Date 4-19-16

Address to send permit 60 C+5 Design + Engineering, Inc. (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Authorized Agent:

Date 5/101 <u>-</u>6

Show Location of:	
(2) Show / Indicate: North (N) on Plan (3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) (4) Show: All Existing Structures on your Property (5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (6) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (7) Show any (*): (*) Wetlands; or (*) Slopes over 20%	•
See attached Plan Set	
	112000000
Please complete (1) – (7) above (prior to continuing)  Changes in plans must be approved by the Planning & Zoning Dept.	g Dept. (
Description Measurement Description Measurement	mt
Setback from the Lake (ordinary high-water mark)   Setback from the River, Stream, Creek   Setback from the Bank or Bluff	Feet Feet
Setback from the North Lot Line  Setback from the South Lot Line  Setback from the South Lot Line  Setback from the West Lot Line  Setback from the East Lot Line  Setback from the Feet  Setback from Wetland  Feet  Setback from Wetland  Setback from Wetland  Feet  Setback	Feet Feet
ing Tank 40 Feet Setback to Well  Feet Proposing Feet Feet Proposition from the manufactured must be making from the manufactured from the control control of the feet Proposition from the manufactured from the manufactur	Feet
other previously surveyed corner or marked by a licensed surveyor at the owner's expense.  Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.  (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).	a from
NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not beg For The Construction Of New One & Two Family Dwelling: ALL Municipalities are Required To Enforce The Uniform Dw The local Town, Village, City, State or Pederal Record Town Issuance if Construction or Use has not beg For The Construction Of New One & Two Family Dwelling: ALL Municipalities are Required To Enforce The Uniform Dw The local Town, Village, City, State or Pederal Iso require permits.  Sanitary Number: 12(823) # of bedrooms:  Sanitary Number: 12(823)   # of bedrooms:  Sanitary Number: 12(823)   # of bedrooms:	
Permit #	No No
Illy Created Xyes \( \text{No} \) Were Property Lines Represented by Owner \( \text{Ares} \) Was Property Surveyed \( \text{Ares} \) Zoning District \( \text{Ares} \) Was Property Surveyed \( \text{Ares} \) Zoning District \( \text{Ares} \) Was Property Surveyed \( \text{Ares} \) Zoning District \( \text{Ares} \) Was Property Surveyed \( \text{Ares} \) Zoning District \( \text{Ares} \) Was Property Surveyed \( \text{Ares} \) Zoning District \( \text{Ares} \) Was Property Surveyed \( \text{Ares} \) Was Property Surveyed \( \text{Ares} \) Zoning District \( \text{Ares} \) Was Property Surveyed \( \text{Ares} \) Was Property Surveyed \( \text{Ares} \) Zoning District \( \text{Ares} \) Was Property Surveyed \( Ares	*
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Hold For Sanitary: 19 Hold For TBA:   Hold For Affidavit:   Hold For Fees:   Hold For Fees:	



